

County: Clark

Facility ID: 2210

Page 1

CLARK COUNTY HEALTH CARE CENTER
WE4266 ST HWY 29OWEN 54460 Phone: (715) 229-2172
Operated from 1/1 To 12/31 Days of Operation: 366
Operate in Conjunction with Hospital? No
Number of Beds Set Up and Staffed (12/31/04): 172
Total Licensed Bed Capacity (12/31/04): 172
Number of Residents on 12/31/04: 167Ownership:
Highest Level License: Skilled
Operate in Conjunction with CBRF? No
Title 18 (Medicare) Certified? Yes
Title 19 (Medicaid) Certified? Yes
Average Daily Census: 163

Services Provided to Non-Residents		Age, Gender, and Primary Diagnosis of Residents (12/31/04)				Length of Stay (12/31/04)		%
Home Health Care	No	Primary Diagnosis	%	Age Groups	%	Less Than 1 Year		30.5
Supp. Home Care-Personal Care	No	-----	-----	-----	-----	1 - 4 Years		45.5
Supp. Home Care-Household Services	No	Developmental Disabilities	0.0	Under 65	14.4	More Than 4 Years		24.0
Day Services	No	Mental Illness (Org./Psy)	41.3	65 - 74	16.2			-----
Respite Care	No	Mental Illness (Other)	13.2	75 - 84	28.1			100.0
Adult Day Care	Yes	Alcohol & Other Drug Abuse	0.0	85 - 94	36.5	*****		
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	1.2	95 & Over	4.8	Full-Time Equivalent		
Congregate Meals	No	Cancer	10.2		-----	Nursing Staff per 100 Residents		
Home Delivered Meals	No	Fractures	8.4		100.0	(12/31/04)		
Other Meals	No	Cardiovascular	11.4	65 & Over	85.6	-----		
Transportation	No	Cerebrovascular	5.4		-----	RNs		9.6
Referral Service	No	Diabetes	3.6	Gender	%	LPNs		5.0
Other Services	No	Respiratory	5.4		-----	Nursing Assistants,		
Provide Day Programming for		Other Medical Conditions	0.0	Male	43.7	Aides, & Orderlies		
Mentally Ill	Yes	-----	-----	Female	56.3			
Provide Day Programming for			100.0		-----			
Developmentally Disabled	Yes				100.0			

Method of Reimbursement

		Medicare (Title 18)			Medicaid (Title 19)			Other			Private Pay			Family Care			Managed Care				
Level of Care	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	Total Resi- dents	% Of All	
Int. Skilled Care	2	16.7	319	7	5.8	140	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	9	5.4	
Skilled Care	10	83.3	300	108	89.3	120	0	0.0	0	28	82.4	138	0	0.0	0	0	0.0	0	146	87.4	
Intermediate	---	---	---	6	5.0	100	0	0.0	0	6	17.6	90	0	0.0	0	0	0.0	0	12	7.2	
Limited Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	
Personal Care	---	---	---	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	
Residential Care	---	---	---	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	
Dev. Disabled	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	
Traumatic Brain Inj	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	
Ventilator-Dependent	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	
Total	12	100.0		121	100.0		0	0.0		34	100.0		0	0.0		0	0.0		167	100.0	

Admissions, Discharges, and Deaths During Reporting Period		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/04				

Percent Admissions from:		Activities of	%	% Needing Assistance of	% Totally	Total
		Daily Living (ADL)	Independent	One Or Two Staff	Dependent	Number of Residents
Private Home/No Home Health	9.3	Bathing	1.2	61.7	37.1	167
Private Home/With Home Health	6.0	Dressing	21.0	48.5	30.5	167
Other Nursing Homes	5.3	Transferring	34.1	46.1	19.8	167
Acute Care Hospitals	76.7	Toilet Use	29.3	44.9	25.7	167
Psych. Hosp.-MR/DD Facilities	1.3	Eating	39.5	44.9	15.6	167
Rehabilitation Hospitals	0.0	*****				
Other Locations	1.3					
Total Number of Admissions	150	Continence	%	Special Treatments		%
Percent Discharges To:		Indwelling Or External Catheter	4.2	Receiving Respiratory Care		7.2
Private Home/No Home Health	20.3	Occ/Freq. Incontinent of Bladder	55.7	Receiving Tracheostomy Care		1.2
Private Home/With Home Health	19.6	Occ/Freq. Incontinent of Bowel	24.0	Receiving Suctioning		0.6
Other Nursing Homes	6.1			Receiving Ostomy Care		3.6
Acute Care Hospitals	8.1	Mobility		Receiving Tube Feeding		6.0
Psych. Hosp.-MR/DD Facilities	4.1	Physically Restrained	6.0	Receiving Mechanically Altered Diets		53.3
Rehabilitation Hospitals	0.0					
Other Locations	5.4	Skin Care		Other Resident Characteristics		
Deaths	36.5	With Pressure Sores	9.6	Have Advance Directives		74.3
Total Number of Discharges		With Rashes	4.2	Medications		
(Including Deaths)	148			Receiving Psychoactive Drugs		71.9

Selected Statistics: This Facility Compared to All Similar Rural Area Facilities & Compared to All Facilities

	This Facility %	Ownership: Government %	Peer Group Ratio	Bed Size: 100-199 %	Peer Group Ratio	Licensure: Skilled %	Peer Group Ratio	All Facilities %	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	94.8	91.7	1.03	86.1	1.10	85.9	1.10	88.8	1.07
Current Residents from In-County	59.9	77.0	0.78	80.1	0.75	75.1	0.80	77.4	0.77
Admissions from In-County, Still Residing	27.3	23.6	1.16	19.9	1.37	20.5	1.34	19.4	1.41
Admissions/Average Daily Census	92.0	104.9	0.88	143.3	0.64	132.0	0.70	146.5	0.63
Discharges/Average Daily Census	90.8	104.7	0.87	144.8	0.63	131.4	0.69	148.0	0.61
Discharges To Private Residence/Average Daily Census	36.2	49.3	0.73	69.4	0.52	61.0	0.59	66.9	0.54
Residents Receiving Skilled Care	92.8	95.3	0.97	95.9	0.97	95.8	0.97	89.9	1.03
Residents Aged 65 and Older	85.6	87.8	0.98	93.5	0.92	93.2	0.92	87.9	0.97
Title 19 (Medicaid) Funded Residents	72.5	67.5	1.07	71.5	1.01	70.0	1.03	66.1	1.10
Private Pay Funded Residents	20.4	17.9	1.14	16.3	1.25	18.5	1.10	20.6	0.99
Developmentally Disabled Residents	0.0	0.8	0.00	0.7	0.00	0.6	0.00	6.0	0.00
Mentally Ill Residents	54.5	45.1	1.21	32.1	1.70	36.6	1.49	33.6	1.62
General Medical Service Residents	0.0	14.8	0.00	21.4	0.00	19.7	0.00	21.1	0.00
Impaired ADL (Mean)	50.7	49.0	1.03	48.7	1.04	47.6	1.07	49.4	1.03
Psychological Problems	71.9	61.8	1.16	55.2	1.30	57.1	1.26	57.7	1.25
Nursing Care Required (Mean)	10.7	7.1	1.50	7.9	1.36	7.3	1.46	7.4	1.44